Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW MEXICO	-	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Valentino First name R. Middle name Orosco Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	•	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1850	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case): □ I have not used any business name or EINs.				
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.					
	Include trade names and doing business as names	Business name(s)	Business name(s)				
		EINs	EINs				
5.	Where you live		If Debtor 2 lives at a different address:				
		9415 Sirius Ave. Las Cruces, NM 88012					
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Dona Ana County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		PO Box 192 Organ, NM 88052					
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing this district to file for	Check one:	Check one:				
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				

Deb	otor 1 Valentino R. Orosco	0	Case number (if known)							
Par	t 2: Tell the Court About	Your Bankr	uptcy Ca	ise						
7.	The chapter of the Bankruptcy Code you are		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	` □ Chapte	,,		1 1					
		☐ Chapte								
		☐ Chapte								
		_								
		Chapte	er 13							
8.	How you will pay the fee	abo	ut how yo er. If your	u may pay. Typi	cally, if you are paying the fee y	ck with the clerk's office in your local court for more ourself, you may pay with cash, cashier's check, or half, your attorney may pay with a credit card or che	money			
					allments. If you choose this optical Form 103A).	on, sign and attach the Application for Individuals to) Pay			
			•		,	on only if you are filing for Chapter 7. By law, a judge	e may,			
		but i appl	is not req lies to yo	uired to, waive y ur family size and	our fee, and may do so only if yed you are unable to pay the fee	our income is less than 150% of the official poverty in installments). If you choose this option, you must cial Form 103B) and file it with your petition.	line that			
9.	9. Have you filed for ■ No.									
	bankruptcy within the last 8 years?	■ No.								
	•		District		When	Case number				
			District		When	Case number				
			District		When	Case number				
10.	Are any bankruptcy	■ No								
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	☐ Yes.								
	affiliate?									
			Debtor			Relationship to you				
			District		When	Case number, if known				
			Debtor			Relationship to you				
			District		When	Case number, if known				
11.	Do you rent your	■ No.	Go to I	ine 12.						
	residence?		Hae vo	our landlord obtai	ined an eviction judament again	st you and do you want to stay in your residence?				
		☐ Yes.	^	No. Go to line 1	, , ,	or you and do you want to stay in your residence!				
				Yes. Fill out Init	tial Statement About an Eviction	Judgment Against You (Form 101A) and file it with	this			
				bankruptcy peti	tion.					

Deb	otor 1 Valentino R. Oroso	ю		Case number (if known)				
Dor	4.2. Donart About Any Bu		Vou Own oo o Solo Brons					
Par	Report About Any Bu	isinesses	You Own as a Sole Propi	Tetor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.					
		☐ Yes.	☐ Yes. Name and location of business					
	A sole proprietorship is a							
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if ar	ny				
	If you have more than one sole proprietorship, use a		Number, Street, City, S	tate & ZIP Code				
	separate sheet and attach		Chook the engrapriete	hay ta dagariha yayr huginaga:				
	it to this petition.			box to describe your business: siness (as defined in 11 U.S.C. § 101(27A))				
			_	eal Estate (as defined in 11 U.S.C. § 101(51B))				
			_	s defined in 11 U.S.C. § 101(53A))				
				ker (as defined in 11 U.S.C. § 101(6))				
				- ' '				
			☐ None of the abo	ove				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation in 11 U.S	es. If you indicate that you a ns, cash-flow statement, an S.C. 1116(1)(B).	ne court must know whether you are a small business debtor so that it can set appropriate re a small business debtor, you must attach your most recent balance sheet, statement of d federal income tax return or if any of these documents do not exist, follow the procedure				
	For a definition of small	No.	I am not filing under Ch	apter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapt Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy				
		☐ Yes.	I am filing under Chapt	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
	D 487							
		Have Any	y Hazardous Property or I	Any Property That Needs Immediate Attention				
14.	Do you own or have any property that poses or is	■ No.						
	alleged to pose a threat	☐ Yes.						
	of imminent and identifiable hazard to public health or safety?		What is the hazard?					
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed	?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?							
				Number, Street, City, State & Zip Code				

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	tor i valentino R. Orosc	U		Case Hull	TIDET (If Known)				
Part	6: Answer These Quest	ions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
			☐ No. Go to line 16b.						
			■ Yes. Go to line 17.						
		16b.		v business debts? Business debts are delease the business debts are debts.					
			□ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts yo	u owe that are not consumer debts or busing	ness debts				
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chap	ter 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	☐ Yes.		7. Do you estimate that after any exempt p available to distribute to unsecured creditors	roperty is excluded and administrative expense ors?				
	administrative expenses		□ No						
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do you estimate that you	■ 1-49		□ 1,000-5,000 □ 5001-10,000	□ 25,001-50,000 □ 50,001-100,000				
	owe?	☐ 50-99 ☐ 100-19 ☐ 200-99		10,001-25,000	☐ More than100,000				
19.	How much do you estimate your assets to be worth?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
20.	How much do you estimate your liabilities to be?	☐ \$100,0	50,000 101 - \$100,000 101 - \$500,000 1001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion				
Part	7: Sign Below								
For	you	I have ex	amined this petition, and I	declare under penalty of perjury that the inf	formation provided is true and correct.				
				er 7, I am aware that I may proceed, if eligit e relief available under each chapter, and	ole, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.							
		bankrupto and 3571	cy case can result in fines ι		ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519				
		Valentin	o R. Orosco e of Debtor 1	Signature of De	btor 2				
		Executed	on May 26, 2017	Executed on					
			MM / DD / YYYY		MM / DD / YYYY				

Debtor 1	Valentino R. Orosco	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Date May 26, 2017 MM / DD / YYYY	rvizu, III Date orney for Debtor	
	zu, III	
	, Ltd.	
	State & ZIP Code	
Email address trey@arvizulaw.com	75) 527-8600 Email address	arvizulaw.com
Email address trey@arvizulaw.com	, Ltd. M 88004 State & ZIP Code	arvizulaw.com

	n this information to identify your case:				
Debt	or 1 Valentino R. Orosco First Name	Middle Name	Last Name		
Debt	or 2 se if, filing) First Name	Middle Name	Last Name		
		FRICT OF NEW MEXICO	Last Name		
Onite	ed States Bankruptcy Court for the. DIS	TRICT OF NEW MEXICO			
Case (if kno	e number wn)			_	neck if this is an nended filing
	icial Form 106Sum				
Be as	s complete and accurate as possible. If to	wo married people are filing; then complete the inform	rtain Statistical Information ng together, both are equally responsible nation on this form. If you are filing amen x at the top of this page.		
Part	1: Summarize Your Assets				
					ur assets ue of what you own
1.	Schedule A/B: Property (Official Form 10 1a. Copy line 55, Total real estate, from Sc	6A/B) hedule A/B		\$_	86,500.00
	1b. Copy line 62, Total personal property, f	rom Schedule A/B		\$_	6,856.00
	1c. Copy line 63, Total of all property on So	chedule A/B		\$_	93,356.00
Part	2: Summarize Your Liabilities				
					ur liabilities ount you owe
2.	Schedule D: Creditors Who Have Claims S 2a. Copy the total you listed in Column A, A		Form 106D) om of the last page of Part 1 of <i>Schedule D</i>	\$_	26,354.28
3.	Schedule E/F: Creditors Who Have Unsections. Copy the total claims from Part 1 (prior		06E/F) line 6e of <i>Schedule E/F</i>	\$_	0.00
	3b. Copy the total claims from Part 2 (non	oriority unsecured claims) fr	om line 6j of Schedule E/F	\$_	11,542.00
			Your total liabilities	\$	37,896.28
Part	3: Summarize Your Income and Expen	nses			
4.	Schedule I: Your Income (Official Form 106 Copy your combined monthly income from			\$_	1,353.00
5.	Schedule J: Your Expenses (Official Form Copy your monthly expenses from line 22cd			\$_	1,740.97
Part	4: Answer These Questions for Admir	nistrative and Statistical R	ecords		
6.	Are you filing for bankruptcy under Cha ☐ No. You have nothing to report on this		s box and submit this form to the court with y	our other	schedules.
7.	■ Yes What kind of debt do you have?				
	Your debts are primarily consumer	debts. Consumer debts are	e those "incurred by an individual primarily fo	r a perso	nal, family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

0.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim	1
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill	in this inforn	nation to identif	y your case and th	his filing	g:					
Deb	otor 1	Valentino R		`						
	otor 2	First Name		e Name		Last Name				
(Spo	use, if filing)	First Name	Middle	e Name		Last Name				
Unit	ted States Ba	nkruptcy Court fo	or the: DISTRICT	OF NE	W MEXICO					
Cas	se number _									Check if this is an amended filing
		rm 106A/ e A/B: P								12/15
think infor	it fits best. B mation. If more ver every ques	e as complete and e space is needed tion.	l accurate as possib , attach a separate s	le. If two heet to t	o married people this form. On the	n asset fits in more than are filing together, both top of any additional pa n or Have an Interest In	are equally re	sponsible for su	ıpplyir	ng correct
	No. Go to Par Yes. Where is									
1.1				What	it is the property	? Check all that apply				
	9415 Sirius	s Ave.			Single-family ho	ome	Do not o	deduct secured cla	aims o	r exemptions. Put
	Street address,	if available, or other d	escription		• • • • • • •	•		nount of any secured claims on Schedule D: tors Who Have Claims Secured by Property.		
					Manufactured of	or mobile home				
	Las Cruces	s NM	88012-0000		Land			value of the roperty?		rent value of the tion you own?
	City	State	ZIP Code		Investment pro	perty		\$30,000.00		\$30,000.00
				U U	Other	in the property? Check or	(such a			wnership interest by the entireties, or
				••••	_	in the property? Check of	Fee si			
	Dona Ana				Debtor 2 only					
	County					ebtor 2 only the debtors and another		eck if this is come instructions)	nmunit	ty property
					er information yo perty identificatio	u wish to add about this n number:	s item, such as	s local		

Debto	Valentino R. Oroso	00		Case	e number (if known)	
 1.2	you own or have more t	than one, list here:	What is the	property? Check all that apply		
9	415 Sirius Ave. treet address, if available, or other de	escription	☐ Single	e-family home ex or multi-unit building ominium or cooperative	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
C	as Cruces NM ity State	88012-0000 ZIP Code	Land Invest Times Other Who has an Debto		Current value of the entire property? \$1,500.00 Describe the nature of y (such as fee simple, tena life estate), if known. Fee simple	Current value of the portion you own? \$1,500.00 our ownership interest ancy by the entireties, or
_	ounty		Debto At lease Other inform property idea	or 2 only or 1 and Debtor 2 only st one of the debtors and another nation you wish to add about this ite intification number: 2x28" shed - debtor is currentl	•	munity property
1.3 	If you own or have more than one, list here: 1211 McKinley Street Street address, if available, or other description		What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative		Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	
	Alamogordo NM State	88310-0000 ZIP Code	Land		Current value of the entire property? \$110,000.00 Describe the nature of y	
	Otero ounty		Who has an Debto Debto Debto At lease	interest in the property? Check one or 1 only or 2 only or 1 and Debtor 2 only st one of the debtors and another nation you wish to add about this ite.	a life estate), if known. Joint Tenants Check if this is com (see instructions)	ancy by the entireties, or
			1934 sq. fo	ntification number: oot home - owns jointly with fo ty - the divorce decree allows		

Deb	tor 1 _V	alentino R. Oro	sco	Case	e number (if known)	
	If you o	wn or have more	e than one, list h	nere:		
1.4	-			What is the property? Check all that apply		
	9400 Antares		a da a sela ti a a	☐ Single-family home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D</i>	
	Street addre	Street address, if available, or other description		□ Duplex or multi-unit building		laims Secured by Property.
				☐ Condominium or cooperative		
				Manufactured or mobile home		
	Organ	N	M 88052-000	0 ☐ Land	Current value of the entire property?	Current value of the portion you own?
	City	Sta	ate ZIP Code	Investment property	\$0.00	
				☐ Timeshare	Deceribe the neture of	of your ownership interest
				Other	(such as fee simple, t	enancy by the entireties, or
				Who has an interest in the property? Check one	a life estate), if knowr Fee simple	1.
	Dona Ai	20		Debtor 1 only		
	County	la		Debtor 2 only		
	County			Debtor 1 and Debtor 2 only		ommunity property
				At least one of the debtors and another	(see instructions)	
				Other information you wish to add about this ite property identification number:	iii, sucii as iocai	
				1970 Shultz single wide mobile home - in tenant. Mobile home belonged to debtor		
				mobile home after sister passed away.		
2	Add the d	ollar value of the u have attached	e portion you ow for Part 1. Write t	n for all of your entries from Part 1, including any hat number here	/ entries for	\$86,500.00
Part	2: Descri	be Your Vehicles				
	No Yes					
3.1	Make:	Ford		Who has an interest in the property? Check one		I claims or exemptions. Put ured claims on Schedule D:
	Model:	F-150 pickup		■ Debtor 1 only		Claims Secured by Property.
	Year:	1996		Debtor 2 only	Current value of the	Current value of the
	Approxi	mate mileage:	160,000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	formation:	1	☐ At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$4,050.00	\$4,050.00
5 A p	No Yes Add the dages you 3: Descri	ollar value of the have attached for the be Your Personal a	tors, personal wate portion you own or Part 2. Write th and Household Iter	I other recreational vehicles, other vehicles, and ercraft, fishing vessels, snowmobiles, motorcycle according to a for all of your entries from Part 2, including any nat number here	entries for	\$4,050.00 Current value of the portion you own?
						portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B

page 3

Schedule A/B: Property

Debtor 1	Valentino R. 0	Orosco Case	number (if known)
Example	old goods and fu es: Major applian	urnishings ces, furniture, linens, china, kitchenware	
□ No ■ Yes.	Describe		
		Bunk bed and refrigerator, BBQ grill, misc. household items, foldi	na
		chairs, table Location: 9415 Sirius Ave., Las Cruces NM 88012	\$500.00
7. Electron Example	es: Televisions ar	nd radios; audio, video, stereo, and digital equipment; computers, printers, phones, cameras, media players, games	scanners; music collections; electronic devices
☐ Yes.	Describe		
Example No	other collection	figurines; paintings, prints, or other artwork; books, pictures, or other art ob ns, memorabilia, collectibles	iects; stamp, coin, or baseball card collections;
☐ Yes.	Describe		
	ent for sports an es: Sports, photog musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clu	ubs, skis; canoes and kayaks; carpentry tools;
☐ Yes.	Describe		
■ No		, shotguns, ammunition, and related equipment	
□ No		thes, furs, leather coats, designer wear, shoes, accessories	
— 165.	Describe		
		Clothing/shoes Location: 9415 Sirius Ave., Las Cruces NM 88012	\$500.00
■ No		velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry,	watches, gems, gold, silver
13. Non-far Examp ■ No	rm animals oles: Dogs, cats, b	pirds, horses	
	Describe		
■ No	her personal and	I household items you did not already list, including any health aids y	ou did not list
		of all of your entries from Part 3, including any entries for pages you had been determined in the state of t	ave attached \$1,000.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 4

Debtor	1 Valentino R. C	Drosco	Cas	se number (if known)
				claims or exemptions.
	<i>amples:</i> Money you h lo	ave in your wallet, in your	home, in a safe deposit box, and on hand whe	en you file your petition
	institutions. I		ecounts; certificates of deposit; shares in credits with the same institution, list each.	t unions, brokerage houses, and other similar
	es		Institution name:	
		17.1. Savings	Bank 34	\$6.00
		or publicly traded stocks investment accounts with the	prokerage firms, money market accounts	
■ N □ Y	lo 'es	Institution or issue	er name:	
	nt venture	ock and interests in incor	porated and unincorporated businesses, i	ncluding an interest in an LLC, partnership, and
ΠY	es. Give specific info	ormation about them Name of entity:		o of ownership:
Ne No ■ N	egotiable instruments on-negotiable instrume	include personal checks, c ents are those you cannot	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and mone transfer to someone by signing or delivering the	
	•		, 403(b), thrift savings accounts, or other pens	sion or profit-sharing plans
ΠY	es. List each account	t separately. Type of account:	Institution name:	
Yo Ex	amples: Agreements	d deposits you have made	so that you may continue service or use from t, public utilities (electric, gas, water), telecom	
■ N	lo 'es		Institution name or individual:	
_	•	r a periodic payment of mo	ney to you, either for life or for a number of ye	ears)
■ N	- -	suer name and description.		
	J.S.C. §§ 530(b)(1), 5	n IRA, in an account in a 29A(b), and 529(b)(1).	qualified ABLE program, or under a qualif	ied state tuition program.
-	- -	stitution name and descript	ion. Separately file the records of any interest	s.11 U.S.C. § 521(c):
25. Tru	· •	ure interests in property	(other than anything listed in line 1), and ri	ights or powers exercisable for your benefit
		ormation about them		
	amples: Internet dom		and other intellectual property eeds from royalties and licensing agreements	
-		ormation about them		

Official Form 106A/B Schedule A/B: Property page 5

D	ebioi i	valentino R. Orosco		Case number (if known)	
27.	Examp	es, franchises, and other ge bles: Building permits, exclusive		oldings, liquor licenses, professional licens	ses
	■ No □ Yes.	Give specific information abo	ut them		
M	oney or	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	■ No	funds owed to you Give specific information abou	ut them, including whether you already	filed the returns and the tax years	
29.	Examp ■ No	support bles: Past due or lump sum ali Give specific information	mony, spousal support, child support,	maintenance, divorce settlement, property	v settlement
30.	Examp	benefits; unpaid loans yo		s, sick pay, vacation pay, workers' compe	nsation, Social Security
31.	Interes	Give specific information ts in insurance policies bles: Health, disability, or life in	nsurance; health savings account (HS.	A); credit, homeowner's, or renter's insura	nce
	☐ Yes.		r of each policy and list its value. ny name:	Beneficiary:	Surrender or refund value:
32.	If you a		e you from someone who has died rust, expect proceeds from a life insur	ance policy, or are currently entitled to rec	eive property because
	■ No □ Yes.	Give specific information			
33.	Examp		ner or not you have filed a lawsuit o isputes, insurance claims, or rights to		
	■ res.	Describe each daim			
			Judgment for restitution - Sylvia Jdugment entered June 17, 20		\$1,800.00
34.	■ No	contingent and unliquidated Describe each claim	claims of every nature, including c	ounterclaims of the debtor and rights to	o set off claims
35.	■ No	nancial assets you did not al	ready list		
36		•	entries from Part 4, including any o	entries for pages you have attached	\$1,806.00
D.	-4 E - D-	eerika Any Bysinaa Balatad Ba	onerty Vey Own or Heye on Interest In I	int any real actate in Part 4	

Official Form 106A/B Schedule A/B: Property page 6

Debt	or 1	Valentino R. Orosco		Case number (if known)	
37. D	o you d	own or have any legal or equitable interest in any business-relate	ed property?		
	No. Go	to Part 6.			
	Yes. G	o to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. C	o you	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No.	Go to Part 7.			
1	☐ Yes.	Go to line 47.			
Part '	7:	Describe All Property You Own or Have an Interest in That You	ı Did Not List Above		
		have other property of any kind you did not already list les: Season tickets, country club membership	?		
	l No	,			
	Yes.	Give specific information			
54	Δdd ti	he dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
04.	Add t	the defial value of all of your chance from full 7. Write an	at namber nere		ψ0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$86,500.00
56.		: Total vehicles, line 5	\$4,050.00		ψου,σου.σο
57.	Part 3	: Total personal and household items, line 15	\$1,000.00		
58.	Part 4	: Total financial assets, line 36	\$1,806.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$6,856.00	Copy personal property total	\$6,856.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$93,356.00

Debtor 1	Valentino R. Oro	sco		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the	DISTRICT OF NEW ME	EXICO	
Case number				
				☐ Check if this is an amended filing
(if known)	orm 106C			

needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt							
1.	. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption					
		Copy the value from Schedule A/B							
	1211 McKinley Street Alamogordo, NM 88310 Otero County	\$55,000.00		\$11,235.00	11 U.S.C. § 522(d)(5)				
	1934 sq. foot home - owns jointly with former spouse - she currently resides in the property - the divorce decree allows to remain in the home - Debtor and debtor's former spouse each pay half of the Line from <i>Schedule A/B</i> : 1.3			100% of fair market value, up to any applicable statutory limit					
	1996 Ford F-150 pickup 160,000 miles Line from Schedule A/B: 3.1	\$4,050.00		\$450.00	11 U.S.C. § 522(d)(2)				
	Line from Scriedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit					
	Bunk bed and refrigerator, BBQ grill, misc. household items, folding chairs,	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)				
	table Location: 9415 Sirius Ave., Las Cruces NM 88012 Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit					
	Clothing/shoes Location: 9415 Sirius Ave., Las Cruces	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)				
	NM 88012			100% of fair market value, up to					

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Line from Schedule A/B: 11.1

any applicable statutory limit

De	ebtor 1 Valentino R. Orosco		Case number (if known)			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
		Copy the value from Check only one box for each exemption. Schedule A/B				
	Savings: Bank 34 Line from Schedule A/B: 17.1	\$6.00		\$6.00	11 U.S.C. § 522(d)(5)	
!	Line from Genedate A.B. 17.1			100% of fair market value, up to any applicable statutory limit		
	Judgment for restitution - Sylvia Barela (Magistrate Court Jdugment entered	\$1,800.00		\$1,800.00	11 U.S.C. § 522(d)(5)	
	June 17, 2016) Line from <i>Schedule A/B</i> : 33.1			100% of fair market value, up to any applicable statutory limit		
3.	 Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No 					
	☐ Yes. Did you acquire the property covere ☐ No	d by the exemption wi	thin 1	,215 days before you filed this case'	?	
	□ Yes					

Fill	in this information to identify	y your case:			
Deb	tor 1 Valentino R. First Name	Orosco Middle Name Last Nam	ne	-	
	tor 2 use if, filing) First Name	Middle Name Last Nam	ne	-	
Unit	ed States Bankruptcy Court fo	or the: DISTRICT OF NEW MEXICO		_	
Cas	e number				
(if kno				☐ Check	if this is an
				amend	led filing
∩ffi	icial Form 106D				
		ors Who Have Claims Secu	rad by Proport	N/	40/45
<u> </u>	riedule D. Credit	ors Who Have Claims Secu	red by Propert	<u>y</u>	12/15
is nee		sible. If two married people are filing together, both a fill it out, number the entries, and attach it to this for			
1. Do	any creditors have claims secu	red by your property?			
ı	\square No. Check this box and sub	omit this form to the court with your other schedule	es. You have nothing else t	to report on this form.	
	Yes. Fill in all of the information	ation below.			
Part	1: List All Secured Claim	ns			
2. Li	st all secured claims. If a creditor	r has more than one secured claim, list the creditor sepa	rately Column A	Column B	Column C
		or has a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	As Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
muci		nabelical order according to the creditor's name.	value of collateral.	claim	If any
2.1	Dona Ana County Treasurer	Describe the property that secures the claim:	\$401.44	\$30,000.00	\$0.00
	Creditor's Name	9415 Sirius Ave. Las Cruces, NM			
		88012 Dona Ana County			
	PO Box 1179	As of the date you file, the claim is: Check all th	l at		
	Las Cruces, NM 88004	apply. □ Contingent			
	Number, Street, City, State & Zip Code	<u> </u>			
		☐ Disputed			
Who	o owes the debt? Check one.	Nature of lien. Check all that apply.			
_	Debtor 1 only	An agreement you made (such as mortgage	or secured		
	Debtor 2 only	car loan)	,		
	Debtor 1 and Debtor 2 only at least one of the debtors and ano	☐ Statutory lien (such as tax lien, mechanic's liet ther ☐ Judgment lien from a lawsuit	en)		
_	Check if this claim relates to a	Other (including a right to offset)			
(community debt	, , ,			
Date	debt was incurred _2016	Last 4 digits of account number			
	10.110 11.110 1				
2.2	Gold Capital, LLC assigned Graceland	CC Describe the property that secures the claim:	\$1,752.84	\$1,500.00	\$252.84
	Creditor's Name	9415 Sirius Ave. Las Cruces, NM			
		88012 Dona Ana County			
	Properties c/o Attny Brad	Portable 12x28" shed - debtor is			
	Hays	currently residing in it As of the date you file, the claim is: Check all the	l at		
	PO Box 15520 Rio Rancho, NM 87174	apply.			
	Number, Street, City, State & Zip Code	Contingent Unliquidated			
		☐ Disputed			
Who	o owes the debt? Check one.	Nature of lien. Check all that apply.			
_	Debtor 1 only	An agreement you made (such as mortgage	or secured		
	Debtor 2 only	car loan)			
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	en)		

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 3

Debtor 1 Valentino R. Orosco First Name Middle N		ase number (if know)		
i list Name - Wildle N	tanie Last Name			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
October 2015	Last 4 digits of account number			
2.3 Jerry and Eliza Vasquez	Describe the property that secures the claim:	Unknown	\$30,000.00	Unknown
Creditor's Name c/o The Pickett Law Firm PO Box 1239	9415 Sirius Ave. Las Cruces, NM 88012 Dona Ana County			
Las Cruces, NM 88004-1239	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	■ Unliquidated			
Who owes the debt? Check one.	■ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or secure car loan)	ed		
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)			
Date debt was incurred 2012	Last 4 digits of account number			
2.4 Loan Max	Describe the property that secures the claim:	\$3,600.00	\$4,050.00	\$0.00
Creditor's Name	1996 Ford F-150 pickup 160,000 miles			
2309 E. Lohman Ave. Las Cruces, NM 88001	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or secure car loan)	ed		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.5 SN Servicing Corporation	Describe the property that secures the claim:	\$20,600.00	\$110,000.00	\$0.00
Creditor's Name	1211 McKinley Street Alamogordo, NM 88310 Otero County 1934 sq. foot home - owns jointly with			
	former spouse - she currently resides in the property - the divorce decree allows to remain in the home - Debtor			
PO Box 35	and debtor's former spouse each As of the date you file, the claim is: Check all that apply.			
Eureka, CA 95502	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only ■ Debtor 2 only	An agreement you made (such as mortgage or secure car loan)	ed		

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Debtor 1 Valentino R. Orosco		Case number (if know)				
First Name Middle N	lame Last Name					
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechan	ic's lien)				
At least one of the debtors and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)					
Date debt was incurred 1998	Last 4 digits of account number	2002				
Add the dollar value of your entries in Column A on this page. Write that number here: \$26,354.28 If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$26,354.28						
Part 2: List Others to Be Notified for	or a Debt That You Already Listed					
trying to collect from you for a debt you o	owe to someone else, list the creditor in Pa t you listed in Part 1, list the additional cre	bt that you already listed in Part 1. For example, if a collection agency is art 1, and then list the collection agency here. Similarly, if you have more editors here. If you do not have additional persons to be notified for any				
Name, Number, Street, City, State & Eliza Vasquez	Zip Code	On which line in Part 1 did you enter the creditor? _2.3_				
PO Box 1358 Las Cruces, NM 88004		Last 4 digits of account number				
Name, Number, Street, City, State & Granceland Properties, LLC	Zip Code	On which line in Part 1 did you enter the creditor? 2.2				
PO Box 642 Cunningham, KY 42035		Last 4 digits of account number				
Name, Number, Street, City, State & Jerry Vasquez	Zip Code	On which line in Part 1 did you enter the creditor? 2.3				
PO Box 1358		Last 4 digits of account number				

Fill in th	his informati	ion to identify your ca	se:						
Debtor	1	Valentino R. Orosco							
		First Name	Middle Nar	ne	Last Name				
Debtor 2	_	First Name	Middle No		Loot Nome				
(Spouse if	i, illing)	First Name	Middle Nar	ne	Last Name				
United S	States Bankrı	uptcy Court for the:	DISTRICT O	F NEW MEXICO					
Case nu	umher								
(if known)									Check if this is an
								a	amended filing
O#: :		005/5							
	al Form 1				. .				4044
Sche	dule E/F	: Creditors Wh	o Have	Unsecured	Claims				12/15
Schedule left. Attac	e D: Creditors ch the Continu d case numbe	ation Page to this page.	ed by Property If you have no	y. If more space is to information to rep	needed, copy 1	the Part you	need, fill it out,	number the en	tries in the boxes on the
1. Do a	any creditors h	nave priority unsecured of	claims against	you?					
	No. Go to Part 2	2.							
ΠY	Yes.								
Part 2:		Your NONPRIORITY	Unsecured (Claims					
3. Do a		nave nonpriority unsecu							
	No. You have n	othing to report in this part	Submit this fo	orm to the court with	your other sche	edules			
■ Y		g			,				
unse	ecured claim, list none creditor he	npriority unsecured clair st the creditor separately foolds a particular claim, list	or each claim. F	For each claim listed	I, identify what t	ype of claim	it is. Do not list c	laims already inc	cluded in Part 1. If more
									Total claim
4.1	Awa Collec	:t		Last 4 digits of acc	ount number	6498			\$166.00
	Nonpriority Cre								
	Po Box 660 Orange, CA	-	'	When was the debt	incurred?	Opened	4/12/16		_
_		t City State Zlp Code		As of the date you	file, the claim i	is: Check all	that apply		
	Who incurred	I the debt? Check one.							
	Debtor 1 or	nly	I	☐ Contingent					
	Debtor 2 or	nly		☐ Unliquidated					
	Debtor 1 a	nd Debtor 2 only	I	☐ Disputed					
	☐ At least on	e of the debtors and anoth	er -	Type of NONPRIOR	RITY unsecured	d claim:			
	☐ Check if th	nis claim is for a commu	ınity	☐ Student loans					
	debt	ubject to offset?		Obligations arisin		ration agreer	ment or divorce t	hat you did not	
	■ No		!	Debts to pension	or profit-sharin	g plans, and	other similar deb	ots	
	☐ Yes		1	Other. Specify	06 Automob	ile Club			

Debtor	1 Valentino R. Orosco	Case number (if know)						
4.2	Credit One Bank Na Nonpriority Creditor's Name	Last 4 digits of account number	2085		\$494.00			
	Po Box 98872 Las Vegas, NV 89193	When was the debt incurred?	Opened 02/17 4/06/17	Last Active				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that app	ly				
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims —						
	No	Debts to pension or profit-sharing	g plans, and other sir	milar debts				
	Yes	■ Other. Specify Credit Card						
4.3	Debbie McShutt Nonpriority Creditor's Name	Last 4 digits of account number		\$350.00				
	9609 Antares Organ, NM 88052	When was the debt incurred?						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that app	ly				
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims						
	No	Debts to pension or profit-sharin	milar debts					
	Yes	■ Other. Specify past due rer						
4.4	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	4604		\$450.00			
	601 S Minnesota Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 12/10 2/04/11	Last Active				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that app	ly				
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only							
	\square At least one of the debtors and another	<u></u>	Type of NONPRIORITY unsecured claim:					
	Check if this claim is for a community	_	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	· ·	·				
	■ No	Debts to pension or profit-sharing	aring plans, and other similar debts					
	Yes	■ Other. Specify Credit Card						

Debto	or 1 Valentino R. Orosco		Case number (if know)						
4.5	Firstlight Federal Cu Nonpriority Creditor's Name	Last 4 digits of account number	4000	\$4,293.00					
	9983 Kenworthy St El Paso, TX 79924	When was the debt incurred?	Opened 02/15 Last Active 9/03/16						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply						
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community	Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not						
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts						
	☐ Yes	■ Other. Specify Unsecured							
4.6	Portfolio Rc Nonpriority Creditor's Name	Last 4 digits of account number	5683	\$562.00					
	120 Corporate Blvd Ste 1 Norfolk, VA 23502	When was the debt incurred?	Opened 11/29/16						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply						
	■ Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	\square At least one of the debtors and another	_	Type of NONPRIORITY unsecured claim:						
	Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	report as priority claims	Dbligations arising out of a separation agreement or divorce that you did not ort as priority claims						
	■ No		fit-sharing plans, and other similar debts						
	Yes	■ Other. Specify 08 Comenity	y Bank						
4.7	Security Fin Nonpriority Creditor's Name	Last 4 digits of account number	0813	\$560.00					
	C/o Security Finance Spartanburg, SC 29304	When was the debt incurred?	Opened 12/16/15 Last Active 12/16/15						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply						
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	report as priority claims	paration agreement or divorce that you did not						
	■ No	Debts to pension or profit-sharing	aring plans, and other similar debts						
	Yes								

Debt	or 1 Valentino R. Orosco		Case number (if know)						
4.8	Springleaf Financial Services, Inc. Nonpriority Creditor's Name 601 NW Second Street Evansville, IN 47708 Number Street City State Zlp Code Who incurred the debt? Check one.	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim	is: Check all that apply	\$3,000.00					
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not						
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts						
	Yes	■ Other. Specify Personal Lo	an						
4.9	Sun Loan Nonpriority Creditor's Name	Last 4 digits of account number	7898	\$544.00					
	2300 N Main St Ste 206 Las Cruces, NM 88001	When was the debt incurred?	Opened 12/15 Last Active 12/16/15						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:							
	☐ Check if this claim is for a community	Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims							
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts						
	Yes	■ Other. Specify Note Loan							
4.1 0	Unifund Ccr Llc Nonpriority Creditor's Name	Last 4 digits of account number	0038	\$386.00					
	10625 Techwoods Circle Cincinnati, OH 45242	When was the debt incurred?	Opened 04/16						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply						
	■ Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only								
	☐ At least one of the debtors and another	_ '							
	☐ Check if this claim is for a community	Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not						
	■ No	Debts to pension or profit-sharing	☐ Debts to pension or profit-sharing plans, and other similar debts						
	Yes	■ Other. Specify Factoring C	ompany Account Webbank						

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6~	\$	0.00
		you did not report as priority claims	6g.	ў	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	11,542.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	11,542.00

Fill in this infor	Fill in this information to identify your case:								
Debtor 1	Valentino R. Oroso	co							
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW ME	XICO						
Case number									
(if known)									

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Graceland Portable Building PO Box 642 Cunningham, KY 42035	48 month Rental Purchase Agreement entered into October 31, 2015

Fill in this	s information to identify your	case:		
Debtor 1	Valentino R. Oros	CO Middle Name	Last Name	
Debtor 2	i list Name	Middle Name	Last Name	
Spouse if, fill	ing) First Name	Middle Name	Last Name	
Jnited Sta	ates Bankruptcy Court for the:	DISTRICT OF NEW MEXI	СО	
Case num	nher			
if known)				☐ Check if this is an
				amended filing
Officia	l Form 106H			
	dule H: Your Cod	ahtars		12/15
JUITEC	dule II. Tour Cou	entoi 3		12/13
ill it out, a our name		boxes on the left. Attach the left of the	ne Additional Page t	ion. If more space is needed, copy the Additional Page o this page. On the top of any Additional Pages, write as a codebtor.
■ No				
☐ Ye:				
	thin the last 8 years, have yo na, California, Idaho, Louisiana			y? (Community property states and territories include ington, and Wisconsin.)
_				,
_	. Go to line 3.	one and and any finding Process	de como estable de como	
■ Ye	s. Did your spouse, former spo	use, or legal equivalent live w	ith you at the time?	
	■ No			
	☐ Yes.			
	In which community stat	e or territory did you live?	-NONE-	. Fill in the name and current address of that person.
	Name of your spouse, former sp	ouse, or legal equivalent		
	Number, Street, City, State & Zi			
in line Form	e 2 again as a codebtor only	if that person is a guaranto	r or cosigner. Make	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 16G). Use Schedule D, Schedule E/F, or Schedule G to fi
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			Schedule E/F, line
				☐ Schedule G, line
-	Number Street			_
	City	State	ZIP Code	
				_
3.2	Name			Schedule D, line
	Hanto			☐ Schedule E/F, line
	Nearbon			— Scriedule G, illie
	Number Street City	State	ZIP Code	

Fill	in this information t	to identify your ca	ase:								
Del	btor 1	Valentino R.	Orosco			_					
	btor 2 buse, if filing)					_					
Uni	ited States Bankrup	otcy Court for the:	DISTRICT OF NEW M	IEXICO							
	se number nown)						□ A		ed filing ent showin	g postpetition ollowing date:	chapter
0	fficial Form	106I					M	M / DD/ Y	////	· ·	
S	chedule I:	Your Inco	ome				IVI	IVI / DD/ T	111		12/15
sup spo atta	plying correct info use. If you are sep ch a separate she	ormation. If you parated and you	ible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and you th you, do not incl	r spouse i ude inforr	s liv natio	ing with on about	you, inclu your spo	ude inforn ouse. If mo	nation about ore space is i	your needed,
1.	Fill in your empl information.	oyment		Debtor 1				Debtor 2	or non-fi	ling spouse	
	If you have more attach a separate information about	page with	Employment status	☐ Employed ■ Not employed				☐ Emplo	•		
	employers.	dadilorial	Occupation								
	Include part-time, self-employed wo		Employer's name								
	Occupation may or homemaker, if		Employer's address								
			How long employed th	nere?				_			
Par	rt 2: Give De	tails About Mon	thly Income								
	imate monthly incouse unless you are		ate you file this form. If y	ou have nothing to	report for	any I	ine, write	\$0 in the	space. Inc	clude your nor	n-filing
	ou or your non-filing e space, attach a s		re than one employer, co	mbine the informati	on for all e	emplo	oyers for	that perso	on on the li	nes below. If y	ou need
							For Deb	tor 1		otor 2 or ng spouse	
2.			ry, and commissions (be calculate what the monthly		2.	\$		0.00	\$	N/A	
3.	Estimate and lis	t monthly overti	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lin	e 2 + line 3.		4.	\$		0.00	\$	N/A	

				Fo	r Debtor 1		r Debtor 2 or n-filing spouse
	Сору	line 4 here	4.	\$	0.00	\$	N/A
5.	List a	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$_	N/A
	5e.	Insurance	5e.	\$	0.00	\$	N/A
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
	5g.	Union dues	5g.	\$	0.00	\$	N/A
	5h.	Other deductions. Specify:	5h.+	\$	0.00	- \$ _	N/A
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A
	8e.	Social Security	8e.	\$	1,273.00	\$	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food stamps	_ 8f.	\$_	80.00	\$	N/A
	8g.	Pension or retirement income	8g.	\$_	0.00	\$_	N/A
	8h.	Other monthly income. Specify:	_8h.+	\$_	0.00	- \$_	N/A
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,353.00	\$_	N/A
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		1,353.00 + \$		N/A = \$ 1,353.00
-		he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	*				1,7.1
11.	State Include other	e all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a	depend		•		Schedule J. 11. +\$ 0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$ 1,353.00 Combined monthly income
13.	Do yo	ou expect an increase or decrease within the year after you file this form? No.	•				monuny income
		Yes. Explain: Debtor will be working side jobs in order to meet his	expen	ses	and pay the Cha	nter	13 plan payment
	_	2000. This Do Working Glad Jose in Gradi to Model file		550	paj 1110 Olit		. o pian paymont

	in this informa	tion to identify yo	our case.			1				
						Ol	1-16 (1-11	_		
Deb	tor 1	Valentino R.	Orosco			Ch	eck if this is An amer	s: nded filing		
	tor 2						A supple	ment show	wing postpetition chapte	r
(Spo	ouse, if filing)						13 exper	ises as of	the following date:	
Unit	ed States Bankr	uptcy Court for the	: DISTRI	CT OF NEW MEXICO			MM / DD	/ YYYY		
	e number nown)									
Of	fficial Fo	rm 106J								
Sc	chedule	J: Your	Exper	ises					1:	2/15
Be info	as complete a ormation. If m nber (if know	and accurate as	possible eded, atta	If two married people ar ch another sheet to this						
Pari	t 1: Descr Is this a join	ibe Your House	hold							—
	■ No. Go to	line 2.		ata hawaahaldO						
	□ Yes. Doe		ın a separ	ate household?						
	=	~	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ebtor 2.			
2.	Do you have	e dependents?	■ No							
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Depe age	ndent's	Does dependent live with you?	
	Do not state								□ No	
	dependents	names.							☐ Yes	
									□ No □ Yes	
					-				□ No	
									☐ Yes	
									□ No	
									☐ Yes	
3.	expenses of	enses include f people other t d your depende	han $_{m \Box}$	No Yes						
Par	f 2: Fstim	ate Your Ongoi	na Month	v Fynenses						
Est exp	imate your ex	penses as of y	our bankr	uptcy filing date unless y y is filed. If this is a supp	ou are using this followed are using the following the second sec	orm as a s e <i>J</i> , check	supplemer the box at	it in a Cha the top o	apter 13 case to report of the form and fill in th	i ie
the		n assistance an		government assistance i cluded it on <i>Schedule I:</i>)				Your exp	enses	
`		,		_						
4.		or home owners and any rent for th		ses for your residence. In triot.	nclude first mortgag	e 4.	\$		580.00	
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
		rty, homeowner's				4b.	:		0.00	
				ipkeep expenses		4c.	:		0.00	
5.		owner's associat		dominium dues our residence, such as ho	me equity loans	4d. 5.			0.00 289.95	
٥.	aaonai i	gage payiii	, o. y		mo oquity louris	٥.	Ψ		203.30	

Official Form 106J Schedule J: Your Expenses
Case 17-11360-j13 Doc 1 Filed 05/26/17 Entered 05/26/17 11:50:19 Page 31 of 43

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

Yes.

Explain here: Debtor anticipates working side-jobs in order to meet his monthly obligations and make his plan payments.

page 2

Official Form 106J Schedule J: Your Expenses

Case 17 11360 i12 Doe 1 Filed 05/26/17 Entered 05/26/17 11:50:10 Dags 22 of 42

Fill in this informa	ation to identify your o	case:		
Debtor 1	Valentino R. Orosc	0		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
	kruptcy Court for the:	DISTRICT OF NEW MEXICO		
Case number				
(if known)				☐ Check if this is an amended filing
Official Form Declarati		n Individual De	btor's Schedul	les 12/15
If two married peo	ple are filing together	, both are equally responsible	for supplying correct information	ation.
obtaining money of		connection with a bankruptcy		false statement, concealing property, or to \$250,000, or imprisonment for up to 20
Sign I	Below			
Did you pay	or agree to pay some	one who is NOT an attorney to	help you fill out bankruptcy	forms?
■ No				
☐ Yes. Na	me of person			ttach Bankruptcy Petition Preparer's Notice, leclaration, and Signature (Official Form 119)
	/ of perjury, I declare t true and correct.	that I have read the summary a	and schedules filed with this	declaration and
X /s/ Valen	tino R. Orosco		X	
	R. Orosco of Debtor 1		Signature of Debtor 2	
Date Ma	ay 26, 2017		Date	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

	in this information to identify yo				
Deb	tor 1 Valentino R. Or	OSCO Middle Name	Last Name		
	tor 2 use if, filing) First Name	Middle Name	Last Name		
Unit	ed States Bankruptcy Court for the	e: DISTRICT OF NEW MEX	ICO		
Case (if kno	e number 			_	Check if this is an mended filing
Sta Be as	icial Form 107 Atement of Financial s complete and accurate as pos mation. If more space is needed ber (if known). Answer every qu	sible. If two married people a	are filing together, both are	equally responsible for sup	
Part	1: Give Details About Your N	Marital Status and Where You	Lived Before		
1.	What is your current marital sta	tus?			
	☐ Married■ Not married				
2.	During the last 3 years, have yo	u lived anywhere other than	where you live now?		
	■ No □ Yes. List all of the places you	u lived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	Within the last 8 years, did you s and territories include Arizona, C				
	■ No □ Yes. Make sure you fill out S	chedule H: Your Codebtors (Of	fficial Form 106H).		
Part	Explain the Sources of Yo	our Income			
	Did you have any income from o Fill in the total amount of income y If you are filing a joint case and yo	ou received from all jobs and a	all businesses, including part	time activities.	ndar years?
	□ No■ Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	the calendar year before that: nuary 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$21,528.00	☐ Wages, commissions, bonuses, tips	
		Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

5.	Include include and other	come regard public benef	less of wheth it payments;	er that incom pensions; rer	ie is taxable. Exa ital income; inter	mples of est; divid		e alimony; ch ected from la	awsuits; r	oyalties; ar	ecurity, unemploy d gambling and lo	
	List each	source and t	he gross inco	me from eac	h source separat	ely. Do n	ot include income	e that you list	ted in line	e 4.		
	□ No											
	Yes.	Fill in the de	tails.									
				Debtor 1				Debtor	າ			
				Sources of Describe be		each	s income from source e deductions and ions)	Source	s of inco e below.	ome	Gross income (before deduct and exclusions	ions
		1 of currer iled for ban	nt year until kruptcy:	SSI Benef	ts		\$6,365.00)				
				Food stam	ps		\$400.00)				
	r last calen anuary 1 to	dar year: December :	31, 2016)	SSI Benef	ts		\$14,627.00)				
				Workers C Benefits	ompensation		\$600.00)				
				Food stam	ps		\$240.00)				
		dar year bei December :		SSI Benef	its		\$12,435.00)				
	u O Lila	0		Mada Dafan	- V Ellad (F	.						
6.		Debtor 1's	or Debtor 2'	's debts prin Debtor 2 has	e You Filed for E narily consumer primarily consu nily, or householo	debts? mer deb	ts. Consumer del	<i>bt</i> s are defin	ed in 11 l	U.S.C. § 10	1(8) as "incurred	by an
		During the	90 days befo	re you filed fo	or bankruptcy, did	d you pay	any creditor a to	otal of \$6,425	5* or more	e?		
		□ No.	Go to line 7									
	☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.											
	Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?											
		■ No.	Go to line 7									
		□ Yes	List below e include pay	each creditor	nestic support ob		of \$600 or more a s, such as child su				it creditor. Do not include payments	to an
	Creditor'	s Name and	I Address		Dates of paymer	nt	Total amount paid	Amoun still	t you I owe	Was this	payment for	

Case number (if known)

Debtor 1 Valentino R. Orosco

Deb	tor 1	Valentino R. Orosco		Cas	se number (if known)		
	<i>Inside</i> of whi	n 1 year before you filed for bankruptors include your relatives; any general pach you are an officer, director, person in iness you operate as a sole proprietor. 1 by.	artners; relatives of any ge control, or owner of 20%	neral partners; partners partners or more of their votin	erships of which you	ou are a gener iny managing	al partner; corporations agent, including one fo
	_	No /es. List all payments to an insider.					
	Insid	er's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	r this payment
	inside	n 1 year before you filed for bankrupteer? e payments on debts guaranteed or cos		yments or transfer a	any property on a	ccount of a c	lebt that benefited an
	_	No ⁄es. List all payments to an insider					
	Insid	er's Name and Address	Dates of payment	Total amount paid	Amount you still owe		r this payment ditor's name
Parí	4:	Identify Legal Actions, Repossession	ns, and Foreclosures				
	modifi □ N ■ Y	I such matters, including personal injury cations, and contract disputes. No Yes. Fill in the details.					·
	Case Case	e title e number	Nature of the case	Court or agency	,	Status of t	he case
	Grad Kent aka Vale	Capital, LLC Assignee celand Properties, LLC a cucky limited liability company, Graceland Portable Buildings v. ntino Orosco 4-CV-2016-01619	Replevin action	Dona Ana Cour Court 110 Calle de Al Las Cruces, NN	egra	■ Pending □ On app □ Conclud	eal
	Robl	v and Eliza Vasquez v. Valentino les Orosco 07-CV-2017-00728	Breach of Contract/Unlawful Detainer	Third Judicial D 201 Picacho Av Las Cruces, NN	venue	■ Pending □ On app □ Conclud	eal
		n 1 year before you filed for bankrupto call that apply and fill in the details below		erty repossessed, t	foreclosed, garnis	shed, attache	d, seized, or levied?
	_	No. Go to line 11.					
		es. Fill in the information below.	December the December		D-4-		Value of the
	Crea	itor Name and Address	Describe the Property Explain what happene	ıd.	Date		Value of the property
		n 90 days before you filed for bankrup unts or refuse to make a payment bec	otcy, did any creditor, inc		nancial institutior	າ, set off any	amounts from your
	_	No /es. Fill in the details.					

Official Form 107

Describe the action the creditor took

Amount

Creditor Name and Address

Date action was

taken

Debtor	1 Valentino R. Orosco		Case number	(if known)	
	thin 1 year before you filed for bankru urt-appointed receiver, a custodian, or		ras any of your property in the possession of an a er	assignee for the bene	efit of creditors, a
	No				
	Yes				
Part 5:	List Certain Gifts and Contribution	s			
13. Wi	thin 2 years before you filed for bankr	uptcy, o	did you give any gifts with a total value of more t	han \$600 per person	?
	No Yes. Fill in the details for each gift.				
Gi	ifts with a total value of more than \$60 per person	0	Describe the gifts	Dates you gave the gifts	Value
	erson to Whom You Gave the Gift and ddress:				
14. Wi	thin 2 years before you filed for bankr No	uptcy, o	did you give any gifts or contributions with a tota	Il value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or c			_	
m Cl	ifts or contributions to charities that tore than \$600 harity's Name ddress (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value
Part 6:	List Certain Losses				
	thin 1 year before you filed for bankru gambling?	ptcy or	since you filed for bankruptcy, did you lose anyt	thing because of the	it, fire, other disaster,
	No				
	Yes. Fill in the details.				
	escribe the property you lost and bw the loss occurred	Include	ibe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Part 7:	List Certain Payments or Transfers				
16. Wi i co i Inc	thin 1 year before you filed for bankru nsulted about seeking bankruptcy or p lude any attorneys, bankruptcy petition p	ptcy, di prepari	id you or anyone else acting on your behalf pay on gar bankruptcy petition? rs, or credit counseling agencies for services required		rty to anyone you
	No Yes. Fill in the details.				
Ac Er	erson Who Was Paid ddress mail or website address erson Who Made the Payment, if Not Y	ou .	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Ai Pi La	rvizulaw.com, Ltd. O Box 1479 as Cruces, NM 88004 ey@arvizulaw.com		Attorney Fees	May 2017	\$1,000.00
La	as Cruces, NM 88004				

Debtor 1 Valentino R. Orosco Case number (if known)

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any proper promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details.					
	Person Who Was Paid Address	Description and vatransferred	alue of any prope	rty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affai le as security (such as th	irs?			
	Person Who Received Transfer Address Person's relationship to you	Description and va property transferre			ny property or eceived or debts hange	Date transfer was made
19.	Within 10 years before you filed for bankruptobeneficiary? (These are often called asset-prote No ☐ Yes. Fill in the details.	· · ·	/ property to a se	lf-settled trus	st or similar device o	of which you are a
	Name of trust	Description and va	alue of the proper	ty transferre	d	Date Transfer was made
Par	8: List of Certain Financial Accounts, Insti	ruments, Safe Deposit	Boxes, and Stora	ge Units		
	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, association No	other financial accoun	ts; certificates of			
		Last 4 digits of account number	Type of account instrument	clos	e account was sed, sold, ved, or sferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, any s	safe deposit	box or other deposi	tory for securities,
	Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had access to it? Address (Number, Street, City, State and ZIP Code)		ontents	Do you still have it?
22.	Have you stored property in a storage unit or ■ No □ Yes. Fill in the details.		home within 1 ye	ar before you	ı filed for bankrupto	ry?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or hat to it? Address (Number, State and ZIP Code)		escribe the c	ontents	Do you still have it?

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Valentino R. Orosco Case number (if known)

Par	19: Identify Property You Hold or Control for	Someone Else							
23.	Do you hold or control any property that someofor someone.	one else owns? Include any prop	erty y	ou borrowed from, are storing for,	or hold in trust				
	No Sill in the details								
	Yes. Fill in the details. Owner's Name	Where is the property?	De	scribe the property	Value				
	Address (Number, Street, City, State and ZIP Code)	(Number, Street, City, State and ZIP Code)	50	soribe the property	Value				
Par	t 10: Give Details About Environmental Information	ation							
For	the purpose of Part 10, the following definitions	apply:							
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul	ir, land, soil, surface water, grou	_	•					
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		al law,	whether you now own, operate, o	r utilize it or used				
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or	mental law defines as a hazardo	us wa	ste, hazardous substance, toxic s	ubstance,				
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wh	en the	ey occurred.					
24.	Has any governmental unit notified you that you	u may be liable or potentially liab	le und	der or in violation of an environme	ntal law?				
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State & ZIP Code)	and	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?								
	■ No								
	Yes. Fill in the details.	O		Forder on the Law March	Data af matica				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adminis	strative proceeding under any en	viron	mental law? Include settlements a	nd orders.				
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case				
Par	111: Give Details About Your Business or Con	nections to Any Business							
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	any of	f the following connections to any	business?				
	☐ A sole proprietor or self-employed in a	•	•	,					
	☐ A member of a limited liability company	(LLC) or limited liability partners	ship (L	_LP)					
	☐ A partner in a partnership	•	. `	•					
		tive of a corporation							
	☐ An owner of at least 5% of the voting or	•	n						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

otor 1 Valentino R. Orosco	Ca	se number (if known)
■ No. None of the above applies. Go to	Part 12.	
☐ Yes. Check all that apply above and fi	Il in the details below for each business.	
Business Name Address (Number Street City State and ZIP Code)	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
(Name of the County County County)	Name of accountant of bookkeeper	Dates business existed
institutions, creditors, or other parties.	etcy, did you give a financial statement to ar	nyone about your business? Include all financial
Yes. Fill in the details below.		
Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
t 12: Sign Below		
true and correct. I understand that making a bankruptcy case can result in fines up to I.S.C. §§ 152, 1341, 1519, and 3571.	a false statement, concealing property, or o	btaining money or property by fraud in connection
	Signature of Debtor 2	
nature of Debtor 1		
e May 26, 2017	Date	
lo	ent of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?
you pay or agree to pay someone who is no	ot an attorney to help you fill out bankruptc	y forms?
	No. None of the above applies. Go to Yes. Check all that apply above and fi Business Name Address (Number, Street, City, State and ZIP Code) Within 2 years before you filed for bankrup institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) **12:* Sign Below **veread the answers on this **Statement of Fittrue and correct. I understand that making a a bankruptcy case can result in fines up to J.S.C. §§ 152, 1341, 1519, and 3571. Valentino R. Orosco Tentino R. Oros	No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Within 2 years before you filed for bankruptcy, did you give a financial statement to an institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Date Issued Address (Number, Street, City, State and ZIP Code) T12: Sign Below We read the answers on this Statement of Financial Affairs and any attachments, and I are and correct. I understand that making a false statement, concealing property, or or a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years. S. C. §§ 152, 1341, 1519, and 3571. Valentino R. Orosco Tentino R. Orosco Tenti

Fill in this inform	Fill in this information to identify your case:						
Debtor 1	Valentino R. Orosco						
Debtor 2 (Spouse, if filing)							
United States B	sankruptcy Court for the: District of New Mexico						
Case number							

Check	Check as directed in lines 17 and 21:							
According to the calculations required by this Statement:								
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
3. The commitment period is 3 years.								
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only.

■ Not married. Fill out Column A, lines 2-11. ☐ Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. §

101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both

spouses own the same rental property, put the income from that	property in one column only. If you h	nave nothing to report for	any line, write \$0 in the space.
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and commissions (before all	\$	\$
Alimony and maintenance payments. Do not includ Column B is filled in.	e payments from a spouse if	\$	\$
4. All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Include regular contributions from a sfilled in. Do not include payments you listed on line 3.	t. Include regular contributions ld, your dependents, parents,	\$0.00	\$
5. Net income from operating a business, profession, or farm	Debtor 1		
Gross receipts (before all deductions)	\$ 0.00		
Ordinary and necessary operating expenses	-\$ 0.00		
Net monthly income from a business, profession, or fa	arm \$0.00 Copy here ->	\$ 0.00	\$
6. Net income from rental and other real property	Debtor 1		
Gross receipts (before all deductions)	\$0.00		
Ordinary and necessary operating expenses	-\$0.00		
Net monthly income from rental or other real property	\$0.00 Copy here ->	\$ 0.00	\$

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

				Column A Debtor 1		Column B Debtor 2 o		
7.	Interest, dividends, and royalties			\$	0.00	\$		
	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	nt received was a benefi	t under					
	For your spouse	\$0.0	00_					
	For your spouse	\$						
9.	Pension or retirement income. Do not include any a benefit under the Social Security Act.	amount received that was	s a	\$	0.00	\$		
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against he domestic terrorism. If necessary, list other sources on total below.	Security Act or payment umanity, or international	ts or					
				\$	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.	Calculate your total average monthly income. Add each column. Then add the total for Column A to the t		\$	0.00	+		= \$	0.00
					J L			average aly income
12. 13.	Copy your total average monthly income from line Calculate the marital adjustment. Check one: ■ You are not married. Fill in 0 below. □ You are married and your spouse is filing with your						\$	0.00
	☐ You are married and your spouse is not filing with							
	Fill in the amount of the income listed in line 11, 0 dependents, such as payment of the spouse's tax	x liability or the spouse's	suppor	rt of someone	other th	an you or you	ır dependen	ts.
	Below, specify the basis for excluding this income adjustments on a separate page.	e and the amount of inco	ome dev	oted to each	purpose	. If necessary	/, list addition	nal
	If this adjustment does not apply, enter 0 below.		æ					
			Φ \$		_			
			+\$		_			
	Total		\$	0.00) c	ppy here=>		0.00
14.	Your current monthly income. Subtract line 13 fro	om line 12.					\$	0.00
15.	Calculate your current monthly income for the ye	ear. Follow these steps:						
	150 Copy line 14 horo-						\$	0.00
	Multiply line 15a by 12 (the number of months						x 12	
	15b. The result is your current monthly income for t	the year for this part of th	e form.				\$	0.00

Debt	or 1	Vale	ntino R. Orosco		Case number (if known)		
16	. Cal	culate	the median family income that applies to	you. Follow these step	DS:		
	16a	. Fill ir	the state in which you live.	NM			
	16h	Fill in	the number of people in your household.	1			
			the median family income for your state and			¢	43,104.00
	100	To fi	nd a list of applicable median income amoun	ts, go online using the l		Φ	
17	Hov		uctions for this form. This list may also be availed lines compare?	ailable at the bankrupto	y clerk's office.		
17	. 1101	_	Line 15b is less than or equal to line 16c.	On the top of page 1 o	f this form, check box 1. Disposable in	ncome is not c	letermined under
			11 U.S.C. § 1325(b)(3). Go to Part 3. Do		•		
	17b	. o	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Cald your current monthly income from line 14	culation of Your Dispo			
Par	t 3:	Ca	Iculate Your Commitment Period Under 1	U.S.C. § 1325(b)(4)			
18.	Cop	y you	r total average monthly income from line	11		\$	0.00
19.	con	tend th	ne marital adjustment if it applies. If you are not calculating the commitment period under noome, copy the amount from line 13.	e married, your spouse 11 U.S.C. § 1325(b)(4)	is not filing with you, and you allows you to deduct part of your		
			marital adjustment does not apply, fill in 0 o	n line 19a.		- \$	0.00
	19b	. Subt	ract line 19a from line 18.			\$	0.00
20.			your current monthly income for the year			_	0.00
	20a	. Copy	v line 19b	,		\$	
		Multi	ply by 12 (the number of months in a year).			X	12
	20h	The	result is your current monthly income for the	year for this part of the	form	\$	0.00
	200	. 1110	esult is your current monthly income for the	year for this part of the	IOIII		
	20c	. Сору	the median family income for your state and	d size of household fror	n line 16c	\$	43,104.00
	21.	How	do the lines compare?				
			Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.	ise ordered by the cou	rt, on the top of page 1 of this form, ch	neck box 3, Ti	he commitment
			Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4.	nless otherwise ordere	d by the court, on the top of page 1 of	this form, che	eck box 4, The
Par	t 4:	Sig	ın Below				
	By s	signing	here, under penalty of perjury I declare that	the information on this	statement and in any attachments is	true and corre	ect.
)	(/s/	Vale	ntino R. Orosco				
			no R. Orosco e of Debtor 1				
			y 26, 2017				
		MM	/ DD / YYYY	_			
	-		cked 17a, do NOT fill out or file Form 122C-2		t that tame a survey and the state of the st		Par AA al
	It vc	NII Che	cked 17b, fill out Form 122C-2 and file it with	this form. On line 39 o	t that form, convivour current monthly.	income from	line 14 above